



SCHOLARSHIP RECOMMENDATION

As Fund Advisor to the _____, I recommend the following scholarship.

This scholarship recommendation does not:

- Satisfy a previously made pledge to the student, or
- Provide more than incidental benefit to any fund advisors (IRS 4967)

Conflict of interest disclosure: I acknowledge below, and the other Fund advisors acknowledge by signing the other side of this form, that we have no interest in or relationship with the student being recommended. If a relationship exists, the attached copy of committee minutes discloses each conflict and shows that the recommendation was approved by a majority vote of disinterested advisors. Our signatures further acknowledge that we will keep private all information disclosed by the student in their application.

I understand that final approval of this recommendation rests with the Foundation's Board of Directors, whose charge it is to see that all grants are consistent with the Fund's and the Foundation's purposes, as required by IRS regulations.

Fund Representative Signature: _____

Date: _____ Contact Phone number: _____

You may share my contact information with the grantee. (If this box is not checked, only the name of the scholarship will be disclosed to the student and the public).

Special instructions:

Student Name

Amount Suggested

FUND ADVISORS

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Printed Name: _____

Mail, fax, or email completed form to:
Montana Community Foundation, PO Box 1145 Helena, MT 59624; Fax (406) 442-0482; grants@mtcf.org

For questions or more information, call (406) 443-8313 or email grants@mtcf.org.